

PASTOR, BEHLING & WHEELER, LLC 2201 Double Creek Drive, Suite 4004 Round Rock, TX 78664 Tel (512) 671-3434 Fax (512) 671-3446

April 25, 2016

VIA ELECTRONIC MAIL

Raji Josiam Remedial Project Manager US EPA Region 6 1445 Ross Ave, Suite 1200, 6SF-RA Dallas, TX 75202

Re:

Certificate of Insurance for Pastor, Behling & Wheeler, LLC, Remedial Investigation/Feasibility Study (RI/FS) - Area of Investigation 1 (AOI-1) of the USOR Superfund Site, 400 N. Richey Street, Pasadena, Texas

Dear Ms. Josiam:

Pursuant to Section XXVI, Paragraph 105 of the Administrative Settlement Agreement and Order on Consent for RI/FS (Settlement Agreement) for the above-referenced Site, Pastor, Behling & Wheeler, LLC (PBW), on behalf of the Respondents named in the Settlement Agreement, is herewith submitting the attached certificate of insurance providing evidence of the required insurance coverage and naming EPA as an additional insured.

Thank you for the opportunity to submit this document. Should you have any questions, please do not hesitate to contact me at 512-671-3434.

Sincerely,

Eric F. Pastor

PRP Group Project Coordinator

cc: Mr. Lam Tran - Texas Commission on Environmental Quality

Attachment

ATTACHMENT A

PASTOR, BEHLING & WHEELER, LLC CERTIFICATE OF INSURANCE



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 3/1/2016

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

| PRODUCER | | CONTACT NAME: Bonni Stafford | | | | | | | | |
|--|---------|---|--|--|--------|--|--|--|--|--|
| Frost Insurance Agency, Inc. 401 Congress Ave., Ste. 1400 | | PHONE (A/C, No, Ext): 512-473-4548 FAX (A/C, No): | | | | | | | | |
| Austin TX 78701 | | E-MAIL ADDRESS: bonni.stafford@frostinsurance.com | | | | | | | | |
| | | INSURER(S) AFFORDING COVERAGE | | | NAIC # | | | | | |
| | | INSURER A: Admiral Insurance Company | | | 24856 | | | | | |
| INSURED | PASTO-1 | INSURER B: Hartford Underwriters | | | 30104 | | | | | |
| Pastor Behling & Wheeler LLC | | INSURER C: Hartford Insurance Company | | | 38288 | | | | | |
| 2201 Double Čreek Dr Ste 4004 Round Rock TX 78664 | | INSURER D: | | | | | | | | |
| | | INSURER E: | | | | | | | | |
| | | INSURER F: | | | | | | | | |
| | | | | | | | | | | |

COVERAGES CERTIFICATE NUMBER: 1947153407 REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

| | EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. | | | | | | | | | | |
|-------------|--|---|--------|--|---------------|----------------------------|----------------------------|--|------------------------|--|--|
| INSR LTR | | | ADDL S | | | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS | | | |
| Α | X | COMMERCIAL GENERAL LIABILITY | | | FEIECC1376503 | 3/18/2016 | 3/18/2017 | EACH OCCURRENCE | \$1,000,000 | | |
| | | CLAIMS-MADE X OCCUR | | | | | | DAMAGE TO RENTED PREMISES (Ea occurrence) | \$50,000 | | |
| | Х | Contr Pollution | | | | | | MED EXP (Any one person) | \$5,000 | | |
| | | | | | | | | PERSONAL & ADV INJURY | \$1,000,000 | | |
| | GEN | N'L AGGREGATE LIMIT APPLIES PER: | | | | | | GENERAL AGGREGATE | \$2,000,000 | | |
| | Х | POLICY PRO- JECT LOC | | | | | | PRODUCTS - COMP/OP AGG | \$2,000,000 | | |
| | | OTHER: | | | | | | | \$ | | |
| В | AUT | OMOBILE LIABILITY | | | 65UECAV1628 | 3/18/2016 | 3/18/2017 | COMBINED SINGLE LIMIT (Ea accident) | \$1,000,000 | | |
| | X | ANY AUTO | | | | | | BODILY INJURY (Per person) | \$ | | |
| | | ALL OWNED SCHEDULED AUTOS | | | | | | BODILY INJURY (Per accident) | \$ | | |
| | | HIRED AUTOS NON-OWNED AUTOS | | | | | | PROPERTY DAMAGE (Per accident) | \$ | | |
| | | | | | | | | | \$ | | |
| Α | | UMBRELLA LIAB X OCCUR | | | FEIEXS1376603 | 3/18/2016 | 3/18/2017 | EACH OCCURRENCE | \$5,000,000 | | |
| | Х | EXCESS LIAB CLAIMS-MADE | | | | | | AGGREGATE | \$5,000,000 | | |
| | | DED X RETENTION \$ none | | | | | | | \$ | | |
| С | | RKERS COMPENSATION EMPLOYERS' LIABILITY | | | 65WECAH3900 | 3/18/2016 | 3/18/2017 | X PER OTH- STATUTE ER | | | |
| | ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) | | N/A | | | | | E.L. EACH ACCIDENT | \$1,000,000 | | |
| | | | ا ا ا | | | | | E.L. DISEASE - EA EMPLOYEE | \$1,000,000 | | |
| | DES | s, describe under CRIPTION OF OPERATIONS below | | | | | | E.L. DISEASE - POLICY LIMIT | \$1,000,000 | | |
| A | Prof | essional | | | FEIECC1376503 | 3/18/2016 | 3/18/2017 | | 2,000,000 1,000,000 | | |
| <u> </u> | | | | | | | | | | | |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Re: US Oil Recovery Site, City of Pasadena, TX. Certificate Holder has been added as an Additional Insured on the General Liability coverage.

CERTIFICATE HOLDER CANCELLATION

US Environmental Protection Agency 6SF-PR, 1445 Ross Avenue Dallas TX 75202 SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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